

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - **11065**

2. Fiscal Year Covered From

1 / **1** / **2004** Through: **12** / **31** / **2004**

4. Name, file number, and address of labor organization.

Name **General Drivers and Helpers Union Local 421**

Labor Organization File Number **129857**

P.O. Box, Building and Room Number, if any

Street **195 E. 14th St**

City **Dubuque**

State **Iowa** ZIP Code + 4 **52001**

Business Agent

SENDER, COMPLETE THIS SECTION

1. Article Addressed to:
**US Dept. of Labor,
Employment Standards Admin.,
Office of Labor Mgmt. Standards
200 Constitution Ave, NW
Washington, DC 20210**
2. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
3. Print your name and address on the reverse so that we can return the card to you.
4. Attach this card to the back of the mailpiece, or on the front if space permits.

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ X

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered ☐ Return Receipt for Merchandise

☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

5. If your spouse or minor child directly or indirectly had any of the following interests in the exclusions set forth in the instructions):

6. If with, or derived income or other economic benefit of organization represents or is actively seeking to represent.

7.a. Nature of Interest, Transaction, or Income.

NA

7.b. Amount.

State ZIP Code + 4

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

On

8-5-05

Date

563-583-9149

Telephone Number

The transactions, dealings and interests that are reported in the attached LM-30 represent my good faith effort to reconstruct any reportable occurrences for calendar year 2004. Some items may have been unintentionally omitted. If, in the future, it comes to my attention that there is a matter which should have been reported for calendar year, I will file an amended LM-30.

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

12.b. Amount.

14.b. Amount of payment.